



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

EMPLOYEE HEALTH RECORD & IMMUNIZATION/TESTING REQUIREMENTS

Effective Date: August 1, 2003

Policy #: IC-02

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I. PURPOSE: To provide current record of all employees' immunization and tuberculosis screening status and explain immunization and testing requirements for employees.

II. POLICY: Montana State Hospital is responsible for maintenance of employee records regarding tuberculosis screening, Hepatitis B immunizations, and other immunizations recommended by the Department of Public Health and Human Services.

III. DEFINITIONS:

A. MMR - Measles, Mumps, Rubella Vaccination

B. PPD - Mantoux Tuberculin Skin Test

IV. RESPONSIBILITIES:

A. The Human Resources Department is responsible for ensuring that prior to patient contact, all new employees provide documentation of current Tuberculosis status, and documentation of MMR Immunization (if DOB is after 1957).

B. The Medical Clinic Staff are responsible for maintenance of Employee Health Record files and will enter employee's health record into the computer with initial information, including current TB status and Hepatitis B consent/waiver, (DOB after 1957) MMR information if applicable, and other testing or immunizations.

The Medical Clinic Staff will maintain a file folder containing all previously mentioned records and changes as they occur. Changes may include annual TB screening results and dates, flu shots, etc.

Medical Clinic Staff will also administer injections and schedule x-rays as ordered by physician.

C. Department Directors will obtain documentation to show that volunteers, contractors, interns, or students having regular contact with hospital patients are free of communicable tuberculosis.

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V. PROCEDURE:

A. Human Resources (H.R.):

1. Documentation of current Tuberculosis status is to be provided to MSH prior to patient contact. MMRs and titers are not provided for employees
2. Human Resources will prepare a file folder with employee's name, date of birth, social security number, date of employment and hospital department.
3. New employee shall sign consent/waiver form for Hepatitis B immunization.
4. Human Resources will send completed file folder containing the TB, MMR documentation and the signed Hepatitis B vaccination consent/waiver form to the Medical Clinic **prior to patient contact.**
5. Upon termination of Employee, Human Resources will notify Medical Clinic. Notification of all employee terminations will be done on a monthly basis.

B. Medical Clinic Staff:

1. Upon employment and yearly thereafter, MSH employees with history of negative TB skins tests will be notified that they are due for their annual Mantoux Tuberculin Skin Test (hereafter known as PPD). Employees will respond to the request to complete their annual test as soon as possible. Noncompliance may result in disciplinary action and leave without pay until compliance is verified.
2. Employees with past positive PPDs will be certified free of disease by completing the attached certification form and evaluation by a physician. Chest x-rays are required every three years. X-rays are provided by MSH at no cost to the employee.
3. The Medical Clinic Nurse will administer injections and schedule x-rays as ordered by physician. The Medical Clinic Nurse is also primarily responsible for documentation and all associated record keeping of TB screening on all employees.
4. Staff physician will review the Annual Tuberculosis Screen Form and will order needed chest x-rays and evaluate PPDs that are difficult to determine.

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5. The procedure for administration of PPDs is found in the Nursing Procedure Manual.

C. Provisions for these guidelines will be included in contracts as needed.

VI. REFERENCES: Guidelines for Infection Control in Hospital Personnel, CDC 1998.

VII. COLLABORATED WITH: Human Resources, Medical Clinic, Director of Nursing Services, Hospital Administrator.

VIII. RESCISSIONS: #IC-02, *Employee Health Record and Immunization / Testing Requirements* dated December 18, 2002; #IC-08, *Infection Control of Employees* dated September 1, 2002; #IC-02, *Employee Health Record* dated February 14, 2000; HOPP #IC-14-01, *Employee Health Record*, dated March 17, 1996.

IX. DISTRIBUTION: All hospital policy manuals

X. REVIEW AND REISSUE DATE: August 2006

XI. FOLLOW-UP RESPONSIBILITY: Infection Control Nurse

XII. ATTACHMENTS: None

_____/____/____
Ed Amberg Date
Hospital Administrator

_____/____/____
Thomas Gray, MD Date
Medical Director